



COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)			ATTORNEY'S DOCKET NUMBER DYC-3																								
As a below named inventor, I hereby declare that:																											
My residence, post office address and citizenship are as stated below next to my name.																											
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:																											
METHOD FOR FERTILITY CONTROL																											
the specification of which (check only one item below):																											
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> is attached hereto. <input checked="" type="checkbox"/> was filed as United States application Serial No. <u>10/606,289</u> on <u>JUNE 26, 2003</u> and was amended on _____ (if applicable). <input type="checkbox"/> was filed as PCT international application Number _____ on _____, and was amended under PCT Article 19 on _____ (if applicable). </div> <div style="width: 45%; text-align: center;">  </div> </div>																											
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.																											
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.																											
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.																											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; padding: 2px;">PRIOR FOREIGN APPLICATION NUMBER(S)</th> <th style="text-align: left; padding: 2px;">COUNTRY</th> <th style="text-align: left; padding: 2px;">FOREIGN FILING DATE (MM/DD/YYYY)</th> <th style="text-align: left; padding: 2px;">PRIORITY NOT CLAIMED</th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;">0214802.1</td> <td style="padding: 2px;">GREAT BRITAIN</td> <td style="padding: 2px;">06/26/2002</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;"> </td> <td style="padding: 2px;"> </td> <td style="padding: 2px;"> </td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;"> </td> <td style="padding: 2px;"> </td> <td style="padding: 2px;"> </td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;"> </td> <td style="padding: 2px;"> </td> <td style="padding: 2px;"> </td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;"> </td> <td style="padding: 2px;"> </td> <td style="padding: 2px;"> </td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> </tbody> </table>	PRIOR FOREIGN APPLICATION NUMBER(S)	COUNTRY	FOREIGN FILING DATE (MM/DD/YYYY)	PRIORITY NOT CLAIMED	0214802.1	GREAT BRITAIN	06/26/2002	<input type="checkbox"/>				<input type="checkbox"/>				<input type="checkbox"/>				<input type="checkbox"/>				<input type="checkbox"/>			
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POWER OF ATTORNEY: As a named inventor, I hereby appoint I. William Millen (19,544); John L. White (17,746); Anthony J. Zelano (27,969); Alan E.J. Branigan (20,565); John R. Moses (24,983); Harry B. Shubin (32,004); Brion P. Heaney (32,542); Richard J. Traverso (30,595); John A. Sopp (33,103); Richard M. Lebovitz (37,067); James E. Ruland (37,432); Jennifer J. Branigan (40,921); Csaba Henter (50,908) and Nicole E. Kinsey (50,723) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.																											
Send Correspondence to: Customer No. 23599		Telephone No. 703/243-6333	Direct Telephone Calls to:																								
<div style="display: flex; align-items: center;">  <div style="margin-left: 10px;"> 23599 <small>PATENT TRADEMARK OFFICE</small> </div> </div>																											

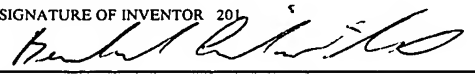
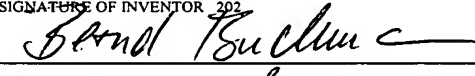
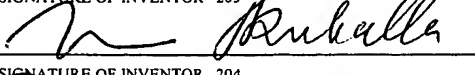

Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)				ATTORNEY'S DOCKET NUMBER DYC-3
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2 0 1	FULL NAME OF INVENTOR	FAMILY NAME LINDENTHAL	FIRST GIVEN NAME Bernhard	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Berlin	STATE OR FOREIGN COUNTRY GERMANY	COUNTRY OF CITIZENSHIP GERMANY
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2 0 5	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2 0 6	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2 0 7	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY

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2 0 8	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2 0 9	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
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	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201 	DATE 18. Aug. 03	SIGNATURE OF INVENTOR 207	DATE
SIGNATURE OF INVENTOR 202 	DATE 20. 8. 03	SIGNATURE OF INVENTOR 208	DATE
SIGNATURE OF INVENTOR 203 	DATE 27.8.03	SIGNATURE OF INVENTOR 209	DATE
SIGNATURE OF INVENTOR 204 	DATE 01-09-03	SIGNATURE OF INVENTOR 210	DATE
SIGNATURE OF INVENTOR 205	DATE	SIGNATURE OF INVENTOR 211	DATE
SIGNATURE OF INVENTOR 206	DATE	SIGNATURE OF INVENTOR 212	DATE